

Employee Benefits and Services Division
Flexible Spending Account Quick Reference Guide
Over-the-Counter Medicines & Products

Over-the-Counter Medications (physician's prescription is required)

Effective January 1, 2011, pursuant to Federal Healthcare Reform Legislation, Over-the-County (OTC) medications, such as pain relievers or antacids will require a physician's prescription in order to be considered eligible for Flexible Spending Account (FSA) reimbursement. The only exception is insulin – which **will not** require a prescription.

Claims for OTC medications must include a physician's prescription, and an adequate receipt accompanied with the claim form, as well as a copy of the label or packaging.

***Please note:** The prescription must be legible or it cannot be approved.

If you have a chronic condition and regularly take an OTC medications for treatment, your physician may prescribe an OTC medication as needed. In this case, your claim will only be approved for the benefit period in which it is submitted. If the prescription does not indicate a specific number of refills, you will need to submit a new prescription each time you purchase the item.

Please see "Submitting Claims for OTC Medications" below.

OTC Products that are not Medications (physician's prescription is not required)

OTC products that are not medications are reimbursable under a FSA without a prescription when the OTC product is used for medical purposes. These products are not cosmetic in nature or merely beneficial to your general health. Eligible items include products that alleviate or treat injuries or illness for you and your dependents. This includes items such as sunscreen products with an SPF 30 or higher, bandages and contact lens solution.

Claims for OTC products that are not medications must include an adequate receipt accompanied with the claim form. An adequate receipt states the name of the product, the date and the amount paid. If your receipt does not include this information, you will need to copy the label from the product or its packaging, circle the correct amount on your receipt, and submit this information with your signed claim form. You do not need to provide a statement from a medical provider or indicate a diagnosis in order to receive reimbursement for these items.

Dual-Purpose Products (Verification of Medical Necessity (VMN) is required)

Certain OTC products are considered dual-purpose, such as vitamins and supplements. This is because, for some individuals the product is used to alleviate a medical condition, while others use the product for general health and well-being. These products may be eligible for reimbursement but require a VMN signed by your physician stating your specific diagnosis or medical condition, a recommendation to take the specific OTC item to treat your condition and documentation of the product and cost.

Employee Benefits & Services provides a Medical Expense Reimbursement (FSA) Verification of Medical Necessity form to assist you in submitting this information. **Submitting a VMN for your claim does not guarantee that the expense will be approved.**

You must submit a new Verification of Medical Necessity each new Plan Year as these forms cannot be approved indefinitely.

***Please note:** A VMN will not be accepted in place of a physician's prescription.

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Excluded Items

OTC products that merely benefit your general health or are cosmetic in nature are NOT reimbursable.

Submitting Claims for OTC Medications

In order to ensure timely reimbursement for your claims for eligible OTC medications, please submit all of the following items:

- A fully completed and signed claim form, **AND**
- A receipt indicating the name of the item purchased, **AND**
- A copy of the product label or package, **AND**
- A healthcare provider's prescription* for the recommended OTC item, which **must** include:
 - The date
 - The name of the patient for whom the OTC item is prescribed
 - The name of the OTC item (if you purchase a generic item, you must provide documentation that supports that it is the therapeutic equivalent to the prescribed drug)
 - The dosage requirement (the potency of the item purchased must match the prescribed amount)
 - The number of refills (unless it is a one-time purchase)
 - The provider's address and license

How Can I Submit My Request For Reimbursement?

- **Fax Your Claim: (909) 387-5566**
- **Interoffice Mail Your Claim: EBSD, mail code 0440**
- **Mail Your Claim: Human Resources, EBSD, 157 West 5th Street, 1st Floor, San Bernardino, CA 92415**

Reimbursement for OTC products still follows the existing rules regarding FSAs. The expense(s) must:

- *Be incurred during your period of coverage*
- *Not be reimbursed through another plan*
- *Be substantiated by a detailed receipt*

If you have any question you may visit our website at www.sbcounty.gov/hr/benefits or contact Employee Benefits & Services at (909) 387-5648 or (909) 387-5787.